BURNS DOANE

BURNS DOANE SWECKER & MATHIS LLP ATTORNEYS AT LAW

ALEXANDRIA, VIRGINIA REDWOOD SHORES, CALIFORNIA

DURHAM, NORTH CAROLINA

REPLY TO: P.O. Box 1404

Alexandria, Virginia 22313-1404

TELEPHONE: +1,703.836.6620

FACSIMILE:

+1.703.836.2021 (Group 3)

+1.703.836.0028 (Group 4)

DATE: October 16, 2003

RECIPIENT INFO	RMATION	SENDER INFORMATION				
То:	Lauren Q. Wells Examiner, U.S.P.T.O.	voice Tel. No.: 703-836-6620				
Voice Tel. No.:		Voice Tel. No.:	703-836-6620			
Fax Tel. No.:	703-872-9307	Sent By:	Timika Snowden			
Your Ref.:		Our Ref.:	016800-438			
		Total Pages (Inc	I. Cover Page):	11		

U.S. Patent Application No. 09/841,078 RE:

MESSAGE:

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Patent Attorney's Docket No. <u>016800-438</u>

IN THE UNITED STAT	ES PATENT AND TRADEMARK OFFICE
In re Patent Application of) VIA FACSIMILE TO: (703) 872-9307
Olivier DE LACHARRIERE et al.) Group Art Unit: 1617
Application No.: 09/841,078) Examiner: Lauren Q. Wells
Filed: April 25, 2001) Confirmation No.: 6852
For: USE OF A HISTAMINE ANTA AN INTERLEUKIN-1 ANTAG AND/OR TNF-ALPHA ANTA IN A COSMETIC, PHARMAC	GONIST) CENTRAL FAX CENTER OCT 1 6 2002
OR DERMATOLOGICAL COMPOSITION AND COMPO OBTAINED	OFFICIAL
AMENDMISNT/	REPLY TRANSMITTAL LETTER
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
Sir:	
Enclosed is a reply for the above-in	dentified patent application.
[] A Perition for Extension of T	Time is also enclosed.
[] A Terminal Disclaimer and t C.F.R. § 1.20(d) are also en	the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 closed.
[] Also enclosed is/are	<u> </u>

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the

[] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents

[] Applicant(s) previously submitted ___, on ___, for which continued examination is

[]\$385.00 (2801) []\$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).

(10/03)

[]

[]

Small entity status is hereby claimed.

identified above.

requested.

P.03/11

Amendment/Reply Transmittal Letter Application No. <u>09/841.078</u> Attorney's Docket No. 016800-438 Page 2

- [] Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) [] (1809/2809) is also enclosed.
- No additional claim fee is required. [X]
- An additional claim fee is required, and is calculated as shown below: []

	No. Of Claims	Highest No. Of Claims Previously Paid for	EXTRA CLAIMS	RATE	Add'l Fre	
Total Claims	17	MINUS 20 =	0	× \$18.00 (1202) =	0.00	
Independent Claims	2	MINUS 3 =	0	× \$86.00 (1201) =	0.00	
If Amendment adds m	ultiple depend	dent claims, add \$2	90.00 (1203)			
Total Claim Amendment Fee						
If small entity status is	claimed, sub	stract 50% of Total	Claim Amen	lment Fee		

•)	A	total	fee	in	the	amount	of \$	·	is	enclosed.
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__to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: October 16, 2003

Registration No. 26,254

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

(10/03)